

Work Order ID 60604

Thursday, July 15, 2010 10:23:24 AM



Page 1

Item ID: D206-642-512

Accept



Setup Start



Revision ID:

Stop



Item Name: Float Skidtube RH

Start Date: 7/15/2010 Start Qty: 1.00



Cust Item ID:

Required Date: 7/22/2010 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan:

RP

Date: 10-7-15 Tooling:

Date:

QC:

Date: SPC (Y/N):

Date:

Run Start



Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
INN-D206-642	Rev M

100

0.00



DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels per PPP D206-642-512 CHG004

S 10/08/06

H for CL 10/08/11

110

0.00



Pick Kit

Packaging

Memo

0.00

Packaging

C. 01/08/06 (1)

120

0.00



QC4- 100% Inspect kits for completeness

QC

Memo

0.00

Quality Control

S 10/08/06

x1

360609

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 60604

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Item ID: D206-642-512

Accept

Setup Start

Revision ID:

Stop

Item Name: Float Skidtube RH

Start Date: 7/15/2010 Start Qty: 1.00

Cust Item ID:

Required Date: 7/22/2010 Req'd Qty: 1.00

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start

Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00



Packaging

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D206-642-512

Location: 75

Rev E

107A262P

140

0.00



QC

QC21- Final Inspection - Work Order Release

Memo

0.00

Quality Control

10/08/30

LMF

10-8-27

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

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Work Order ID: 60604

Parent Item: D206-642-512

Parent Item Name: Float Skidtube RH



Start Date: 7/15/2010

Required Date: 7/22/2010

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev: B 05.09.23 Revised per D206-642 Rev. J KJ/JLM
 IPP Rev: C 07-02-23 As per IIN D206-642 Rev K JLM
 IPP rev D 07.06.06 added K642-512 EC
 IPP Rev: E 07-12-05 ECN 1080p Rev L DD verified by:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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S D206-642-541

Manufactured

No

120

Each

1.0000

1

1



Replacement Skidtube



60609

7/15/2010

Location

Loc Qty

Loc Code

FG073

1

34772

1

K642-512

Manufactured

No

120

Each

0.0000

1

1



saddle kit 642-512



60902

7/15/2010

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries